2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000004332

FILED Mar 31, 2008 Secretary of State

Entity Name: PARKVIEW RESIDENCES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2645 N.E. 207TH STREET NE 11TH AVE

AVENTURA, FL 33180 631,633,635,637,639,641 FT LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

750 SE 3RD AVE 2645 N.E. 207TH STREET

SUITE 202 AVENTURA, FL 33180

FT LAUDERDALE, FL 33116

FEI Number: 56-2456419 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEOPOLD, KORN & LEOPOLD, P.A. WELSH REALTY AND PROPERTY MAN SER 750 SE 3RD AVE

20801 BISĆAYNE BOULEVARÓ SUITE 202 SUITE 501

AVENTURA, FL 33180 US FT LAUDERDALE, FL 33316 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARY WELSH 03/31/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

MITRANI, ELIAS STEPHEN, ROBERT BRUCE Name: Name: 2645 N.E. 207TH STREET Address: 641 NE 11TH AVE Address:

City-St-Zip: NORTH MIAMI, FL 33180 City-St-Zip: FT LAUDERDALE, FL 33301

Title: VTD Title: VTD (X) Change () Addition () Delete

MITRANI, AIDA Name: MOORE, VALARIE Name: Address: 2645 N.E. 207TH STREET Address: 631 NE 11TH AVE

City-St-Zip: NORTH MIAMI, FL 33180 City-St-Zip: FT LAUDERDALE, FL 33301

Title: () Delete Title: SD (X) Change () Addition

SAWICKI, ELIZABETH WELSH, NICHOLAS Name: Name: Address: 2645 N.E. 207TH STREET Address: 750 SE 3RD AVE #202 City-St-Zip: NORTH MIAMI, FL 33180 City-St-Zip: FT LAUDERDALE, FL 33310

Title: () Delete Title: () Change (X) Addition

Name: Name: STEPHEN, KATHY Address: Address: 641 NE 11TH AVE

City-St-Zip: City-St-Zip: FT LAUDERDALE, FL 33301

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICHOLAS WELSH SD 03/31/2008